

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>CP</i>	<i>11/10/00</i>	<i>3/10/00</i>
O.I.P.E. CLASSIFIER	<i>V</i>		<i>3-19-00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>SB</i>	<i>51222</i>	<i>6-8-00</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 " ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	9-13-01
2	✓	✓	6-19-02
3	✓	✓	10-1-02
4	✓	✓	1-28-02
5	✓	✓	3-31-03
6	✓	✓	6-12-03
7	✓	✓	9-13-03
8	✓	✓	12-16-03
9	✓	✓	
10	✓	✓	
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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